



**City of Laguna Niguel  
REQUEST FOR PRELIMINARY REVIEW**

**CITY OF LAGUNA NIGUEL**

Code Enforcement

30111 Crown Valley Parkway

Laguna Niguel, California, 92677

949-362-4320

You have the right to request a preliminary review **within 7 days** of the citation date if you feel this citation was issued in error. This form must be submitted to the City of Laguna Niguel at the address above or emailed to [code@cityoflagunaniguel.org](mailto:code@cityoflagunaniguel.org) and include a copy of the citation. The request shall state the reasons why there was no violation or why the citee is not the responsible person for the violation.

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Please print or type. A complete mailing address is required.

Name: \_\_\_\_\_

Citation #:\_\_\_\_\_ CE Case #:\_\_\_\_\_

Address:\_\_\_\_\_

Telephone #:\_\_\_\_\_

City/State/Zip:\_\_\_\_\_

Email: \_\_\_\_\_

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**REQUEST FOR PRELIMINARY REVIEW: SECTION 1-3-19 OF THE LAGUNA NIGUEL MUNICIPAL CODE**

Under provisions of above Laguna Niguel Municipal Code, I request a Preliminary Review on the citation listed above.

- I am not the responsible person for this violation (Provide details below).
- There was no violation (Provide details below).

Please provide a brief statement below of why you are contesting or you can attach a written statement.

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I declare under penalty of perjury under the laws of the State of California that the foregoing (including any attachment(s)) is true and correct to my knowledge. I understand any statements made herein will be verified.

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Signature

Date

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**FOR OFFICE USE ONLY**

Date received:\_\_\_\_\_

Counter

US Mail

Email